

DAYCARE/EXTENDED DAY PROGRAM COMMITMENT FORM

(Please return this form with your deposit of \$50 by Friday, August 7, 2026)

This deposit will go towards your first daycare billing

Below are the days and specific times I will use the Extended Day Program:

***Include beginning and ending times for each day. Reminder, only sign up for days your student is scheduled to attend school.**

Student Name: _____ **2026-2027 Grade:** _____

Monday	Tuesday	Wednesday	Thursday	Friday
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Student Name: _____ **2026-2027 Grade:** _____

Monday	Tuesday	Wednesday	Thursday	Friday
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Student Name: _____ **2026-2027 Grade:** _____

Monday	Tuesday	Wednesday	Thursday	Friday
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Parent/Guardian Name (Print): _____

Signature: _____

Date: _____